CITY OF GREENVILLE INDIVIDUAL RESIDENTIAL ASSIGNMENT FOR MONTHLY PARKING N LAURENS ST PARKING DECK

NAME		BUSINESS NAME_			
(PLEASE PRINT OR TYPE)			(PLEASE PRINT OR TYPE)		
HOME ADDRESS		BUSINESS ADDRESS			
(NUMBER AND STREET)		ADDRESS	(NUMBER AND STREET)		
CITY STATE HOME	ZIP BUSINESS	CITY	STATE	ZIP	
PHONE	PHONE	DL	NO		
The parking fee is \$69.70 per month totaling 10% of the outstanding balan			nonth. If the fee is not pai	d by the 10th of the month, a late fee	
Once the card is issued it will allow other persons will result in permaner				ONS. Unauthorized use of the card by	
There is a \$69.70 per card deposit duprovided that all monthly charges are of the month, you will owe for that n	e paid in full and the card is re			The deposit will be returned in full th. If tag is not returned by the 5 th day	
Loss of a valid monthly card results	in a replacement fee of \$25.0	0 per card.			
NO REFUNDS shall be given for pa	arking fees.				
The City of Greenville reserves the r	ight to cancel this agreement,	at its discretion, given a thir	y (30) day written notice.		
The City reserves the right to increas	se parking fees after giving a t	hirty (30) day written notice.			
The residential monthly card is valid prevailing daily rate.	for twenty four (24) hour acc	ess. Monthly parkers enterin	g the garage without their	card will be required to pay the	
Make checks payable to "CITY OF Services Division, P.O. Box 488, G		Card number and facility nar	ne on your check and mai	to City of Greenville, Parking	
The City shall not be responsible for relieves the City from any and all of			ılt of parking at the abov	re location. The undersigned	
Any vehicle left in this parking build owner=s expense, at the discretion o			rking Services Division, is	s subject to being towed, at the	
City ordinance prohibits smoking in	stairwell and elevators at all t	imes.			
Primary vehicle information:		Secondary veh	Secondary vehicle information:		
YearMake/Model: _		Year	Make/Model		
State: Tag#		State:	Tag #		
Color:		Color:			
I have read and understand the abo	ve application and agree to a	bide by all rules and regular	ions of said application.		
SIGNATURE OF APPLICANT		DATE			
NOTIFY THE PARKING DIVISI	ON AT 467-4900, WHEN C	HANGES IN VEHICLE(S	OR ADDRESS INFOR	MATION OCCURS.	
OFFICE USE ONLY: Date Issued:	_ Card #:	Issued By:		Revised November 7, 200	